FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	'	PRGANIZA		N									
		(See instruction	ıs)						Offic	e use only	/		
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Exan over	nple: If typyir the lines	ng, type	1	2FĘ4	1M5					
21st Century	Democrats									ш			
						ш				ш			
ADDRESS (number and	1731 (1 street)	CONNECTICUT	AVE N	<b>V</b>	1 1 1							Ш	Ш
(Check if add	2ND	FLOOR		<u> </u>	1 1 1	1 1	1 1		<u> </u>	1 1 1	1 1	1 1	لــــــــــــــــــــــــــــــــــــــ
is changed)		SHINGTON			ш	L	DC		L	2000	9		
			CITY			ST	ATE∡			ZIP	CODE	•	
COMMITTEE'S E-MA													1
<u> </u>	<u> </u>			Ш						ш			
				шш						ш		ш	
COMMITTEE'S WEE		JRL)											
http://www.2	1stdems.org			шш						ш			
					111	1.1	1.1			ш	1.1		Ш
COMMITTEE'S FAX 2023470956	NUMBER												
2. DATE <b>0.2</b>	M / D D / Y	2007											
3. FEC IDENTIFIC	ATION NUMBER	C	C 000	230342									
4. IS THIS STATE	MENT X NEV	V (N) OR		AMENI	DED (A)								
I certify that I have exam	nined this Statement and	d to the best of my know	vledge an	d belief it is tr	ue, correct	and co	mplete	1					
Type or Print Name of	f Treasurer	BILL COMBS											
Signature of Treasure	er Electronically File	ed by BILL COM	BS			Date	е	<b>0</b> 2	Л /	D 2 6	/ <b>Y</b>	Ý 2 0	°0 7
NOTE: Submission of fa		nplete information may								f 2 U.S.C	S437	g.	
Office Use Only				For further in Federal Electron Toll Free 800 Local 202-69	tion Comm 0-424-9530	nission	act:		l	FEC I	FORI		

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)	ndidate
	Name of Candidate	
	Party Affiliation Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		nocratic, ublican,etc.) Party.
	(e) This committee is a separate segregated fund	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party
6.	Name of Any Connected Organization or Affiliated Committee	
1		<b>.</b> .
	Mailing Address	
	CITY▲ STATE ▲ Z	IP CODE A
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	ı
	Membership Organization Trade Association Cooperative	

0 . • (	1 02/2003)		Page <b>3</b>
Write or Type Committee Name	9		
21st Century Democr	ats		
Custodian of Records: possession of Committee	Identify by name, address, (phone number ee books and records.	optional), and position of the	ne person in
Full Name Kelly	Young		
Mailing Address	1731 Connecticut Ave NV	I	
	2nd Floor		
	Washington		20009
Title or Position ♥	CITY A	STATE	ZIP CODE ▲
Preside	nt	Telephone number	626 6193
Full Name	Combs		
	1731 Connecticut Ave NV	ı	
of Treasurer Bill (	1731 Connecticut Ave NV 2nd Floor		20009 –
of Treasurer Bill (	1731 Connecticut Ave NV	DCSTATE	20009 –
of Treasurer Bill ( Mailing Address	1731 Connecticut Ave NV 2nd Floor Washington CITY A	DC	
of Treasurer  Mailing Address  Title or Position   ▼	1731 Connecticut Ave NV 2nd Floor Washington CITY A	DCSTATE▲	ZIP CODE A
of Treasurer  Mailing Address  Title or Position   Treasure  Full Name of Designated	1731 Connecticut Ave NV 2nd Floor Washington CITY A	DCSTATE▲	ZIP CODE A
of Treasurer  Mailing Address  Title or Position   Treasure  Full Name of Designated Agent	1731 Connecticut Ave NV 2nd Floor Washington CITY A	DCSTATE▲	ZIP CODE A

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9.	Banks or Other Depos safety deposit boxes or i	maintains funds.	unts, rents
	Name of Bank, Deposito	ory, etc.	
	B	Bank of America	
	Mailing Address	56 East 42nd St	
		New York NY 10	017

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$ 

CITY 🗷

Corporation

Membership Organization

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Banks or Other Deposite safety deposit boxes or ma Name of Bank, Depository	aintains funds.		unts, rents
Un	ited Bank		
Mailing Address	1875 I St NW		
	Washington	DC 20	008
	CITY 🛆	STATE △ Z	IP CODE △
Name of Any Connecte	d Organization or Affiliated Committee	[ ADD	OITIONAL ]
Mailing Address			
	CITYA	STATE A :	ZIP CODE A
Relationship		STATE A :	ZIP CODE A

Corporation w/o Capital Stock

Trade Association

Labor Organization

Designated Agent		[ ADDITIONAL ]
Full Name		
Mailing Address		
Title or Position ♥	CITY A	STATE A ZIP CODE A
	Te	elephone number

Membership Organization

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Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository	aintains funds.	posits funds, holds accounts, rents  [ ADDITIONAL ]
<sub> </sub> JP	Morgan Chase Bank	1
	201 S Washington Square	
Mailing Address		
	Lansing	MI 48933
	CITY △ 5	STATE   ZIP CODE
Name of Any Connected	d Organization or Affiliated Committee	[ ADDITIONAL ]
		[
Mailing Address		
	CITY▲	STATE ▲ ZIP CODE ▲
Relationship		
neialionship [		
Type of Connected Organ	nization:	
Corporation	Corporation w/o Capital Stock	Labor Organization

Trade Association

Designated Agent		I	[ ADDITIONAL ]
Full Name			
Mailing Address			
Title or Position ▼	CITY &	STATE	ZIP CODE 🛦
	Tel	lephone number	

Membership Organization

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Banks or Other Depositoric safety deposit boxes or maint Name of Bank, Depository, et	tains funds.	e deposits funds, holds accounts, rents
	Banknorth NA PO Box 1377 Lewiston CITY △	ME 04243 - STATE    ZIP CODE    A
Name of Any Connected C	Duranization or Affiliated Committee	
	organization of Anniated Committee	[ ADDITIONAL ]
		[ ADDITIONAL ]
		[ ADDITIONAL ]
Mailing Address	Drganization of Animated Committee	[ ADDITIONAL ]
Mailing Address	Inganization of Animated Committee	[ ADDITIONAL ]
Mailing Address	Inganization or Animated Committee	[ ADDITIONAL ]
Mailing Address	CITY A	[ ADDITIONAL ]  STATE   ZIP CODE
Mailing Address  Relationship  Type of Connected Organiza	CITY A	

Trade Association

Designated Agent		[ ADDITIONAL ]
Full Name		
Mailing Address		
Title or Position ♥	CITY A	STATE A ZIP CODE A
		elephone number

Membership Organization

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Banks or Other Depositor safety deposit boxes or mai Name of Bank, Depository,	intains funds.	ttee deposits funds, holds accounts, rents	
Mailing Address	PO Box 1489  Lumberton  CITY △	NC 28359 — STATE △ ZIP CODE △	
Name of Any Connected	Organization or Affiliated Committee	[ ADDITIONAL ]	
Mailing Address			
	CITY	STATE ▲ ZIP CODE ▲	
Relationship  Type of Connected Organi  Corporation	ization:  Corporation w/o Capital Stock	Labor Organization	

Trade Association

Designated Agent		I	[ ADDITIONAL ]
Full Name  Mailing Address			
Title or Position ♥	CITY A	STATE	
	Te	lephone number	